

# REPORT OF THE CHAIRMAN OF THE EXECUTIVE BOARD OF THE AMERICAN PUBLIC HEALTH ASSOCIATION TO THE GOVERNING COUNCIL, 1967

## Growth and Development

**I**N 1962, when the last Membership Directory of APHA was published, it included the names and affiliations of 13,560 Members and Fellows; this year's newly issued directory includes 18,811. Furthermore, since its appearance, additions bring our total well above the 19,000 mark. Particularly to be complimented are the three Sections whose increase has amounted to about two-thirds or more during this period: Medical Care, Mental Health, Maternal and Child Health.

Growth in members is a hallmark of our times, but with this growth has come corresponding vigor and variety as the changing character of the membership reflects not only new interests, but new attitudes toward community health services. A recent analysis of new membership applications over a three-year period showed that just under half of them were from individuals employed by government; more kinds of professions are evidencing interest and support in the national public health association, but so also are more nonprofessionals.

The Executive Board has recognized the desirability of this trend, and a newly appointed subcommittee has been studying ways in which the nonprofessional interested in community health can find a rewarding outlet for that interest in the Association.

Another subcommittee of the Executive Board has been working with representatives of our affiliated organizations to strengthen the ties of those

groups to the parent body in the ever-present realization that total effectiveness of our Association is significantly increased by the meaningful participation of affiliated state and regional public health associations.

Two very important new Association committees have started work this year. The first is a Committee on Health Manpower chaired by Dr. George James, which will be concerned with the broad problem of recruitment and utilization of manpower, and will also have a close consultative and supportive relationship to our Professional Examination Service. This new group was authorized by the Executive Board last year, and the Committee on Constitution and By-Laws will present to the Governing Council at this meeting amendments to establish it as a Standing Committee of the Association.

The second is an intersectional Committee on the Environment which grew out of suggestions made by a task force on strengthening the role of the Association in environmental health. It was established on a three-year demonstration basis by the Governing Council in 1966, and is chaired by Mr. Wesley Gilbertson. All of these changes and others, such as the suggestion that a new section for community health planners be established, are reactions to current needs.

More basically, the Executive Board is proposing to the Governing Council, following a survey of your membership, that we consider a second "Arden House Conference" to consider the role and structure of the American Public

Health Association in the light of today's health needs. Some of the issues which might be studied will be discussed at the meeting of the Governing Council, under an agenda item introduced by Dr. P. Walton Purdom of the Executive Board.

### National and International

The officers of the Association and your Executive Board, along with the professional members of our staff, have maintained frequent and continuing contact during the past year with the Department of Health, Education, and Welfare through Secretary Gardner, Under-Secretary Cohen, Assistant-Secretary Lee, Surgeon General Stewart, and key members of their staffs. Some of the topics on which we have been consulted, or on which we have expressed our opinions and the positions of the Association, include comprehensive health planning, regional medical programs, Medicare and Medicaid, reorganization of the Public Health Service, state-federal relations, civil rights in the health field, and medical care costs. Where appropriate, statements were filed with congressional committees and expert witnesses were made available to those committees.

We have also participated in a new group, The Medical Intersociety Council, which was formed late in 1966 to provide ongoing communication between national professional health organizations and the federal agencies with health responsibilities. A highly significant working relationship with other agencies, which I reported to the Council last year, has come to fruition in the joint endeavor of the Association of University Programs in Hospital Administration, the American College of Hospital Administrators, the American Hospital Association, and this Association to establish a national accrediting agency for the training of hospital ad-

ministrators. We also are continuing to work with the National League for Nursing in evaluating agency programs for providing home nursing services.

Publication of the National Commission on Community Health Services report, "Health Is a Community Affair," occurred just about a year ago. During the past year, reports of the various task forces have been published. Your Executive Board felt that three areas covered by the commission report and the supplementary reports had priority for implementation by APHA. They are: community of solution, environmental control and the organization, administration and financing of official health agencies. The Board assigned those three areas, respectively, to the Technical Development Board, the Committee on the Environment, and the Program Area Committee on Public Health Administration. Subsequently, a follow-up agency for the total commission report, Community Health, Inc., has been established and funded. Through the W. K. Kellogg Foundation something over \$1,100,000 has been made available for a period of five years to establish a small professional staff under an independent board of directors, to stimulate experimentation and encourage utilization of the ideas and recommendations emanating from the reports of the National Commission. The membership of the corporation is made up of equal numbers of individuals appointed by the two original sponsors, this Association and the National Health Council. It is hoped that by the first of 1968 Community Health, Inc., will be well under way.

Going beyond the borders of our nation, we have seen the flowering of another effort, the seeds of which were planted by our Committee on International Health nearly a decade ago. This is establishment of the World Federation of Public Health Associations. Following two earlier planning sessions,

one in conjunction with our Annual Meeting in Chicago in 1965, the other at Geneva at the time of the 1966 World Health Assembly, we brought together in San Francisco last year representatives from a number of our foreign counterparts (Argentina, Australia, Brazil, Chile, India, Israel, Japan, Mexico, the Netherlands, Nigeria, the Philippines, Venezuela and the United Kingdom). Considerable enthusiasm was evinced for the formation of a world body whose purpose would be to strengthen public health associations in both developed and developing countries, particularly to enhance their role in bringing together lay, academic, and professional groups so that their contributions to the governmental and total health program of the country might be strengthened. The first meeting of the World Federation was held in Geneva at the time of the 1967 World Health Assembly. A constitution was adopted and officers elected. The American Public Health Association was represented by Dr. E. L. Stebbins, Immediate Past President, who was elected executive secretary of the new organization; by Dr. Carl Taylor, present Chairman of our Program Area Committee on International Health; and the Executive Director. Since that time, in a visit by the president of the Pakistan Public Health Association, he proposed a consultation service be arranged to enable his country to benefit from some of the experience gained by this Association during the past 95 years. It is anticipated that other requests of this kind will be forthcoming, if funding resources can be developed to make the service possible.

At the present time the World Health Organization, in its long list of nongovernmental organizations in official relations with WHO, does not have any representing the broad field of public health. After the World Federation of Public Health Associations becomes

more firmly established, it is likely that it will apply for nongovernmental organization status with WHO.

### Section Activity Reports

It is obviously impossible to include in this brief report anything resembling a complete listing of activities of our 15 Sections. However, the Council will doubtless appreciate a few vignettes chosen at random from the Section reports submitted subsequent to our 1966 Annual Meeting. They provide something of the flavor of ongoing Sectional activities as well as an indication of the wide variety of interests within the Association.

The Epidemiology Section again sponsored a summer course in the teaching of epidemiology, held this year under the aegis of the University of Minnesota School of Public Health. Also, their Committee on Indexing of Medical Literature indicates success in "efforts . . . to simplify access to the published literature of epidemiology." One result has been an improvement in the indexing, vocabulary, and subheadings appearing in the *Index Medicus*; another approach being attempted is the preparation of a recurrent bibliography of the literature of epidemiology, 12 monthly issues with an annual bound volume.

The Dental Health Section conducted a series of workshops on such subjects as dental public health administration (1964); preventive methods (1965); and provision of dental care in the community (1966). A workshop has now been proposed on increasing the availability of periodontal care to the public. The Section also has used a unique communications device in preparing a monograph titled "Dental Education—Public Health Concerns," made up of papers from a Dental Health Section program at the 1965 Annual Meeting. It is being distributed as a special

limited publication of the Division of Dental Health, Public Health Service.

The Food and Nutrition Section, celebrating its fiftieth anniversary this year, teamed up with the Epidemiology Section to suggest a most interesting General Session for Miami Beach. Originally proposed under the title of "The Epidemiology of Starvation," the session, with several internationally famous participants, will occur on Friday, October 27, 1967, under the heading, "World War on Hunger."

The Health Officers Section (incidentally, sharing third-place honors for longevity with the Statistics Section—they will be 50 next year) has taken a serious look at its membership problems and the changing pattern of administration of community health services. As a result, its long-range planning committee recommends consideration of merging with Medical Care and perhaps others to form a "Health Care Administration Section."

The Medical Care Section has developed an interesting device for providing an additional outlet for articles in that field. In conjunction with J. B. Lippincott, the Section is taking editorial responsibility for publication in this country of "Medical Care," formerly published in England. Some idea of the need for this additional outlet may be gained from the fact that 125 papers were offered to the Section for the Miami Beach program.

The Mental Health Section is luxuriating in its 77 per cent increase in membership during the past five years. Certainly, congratulations must go to the Membership Committee. This is also one of the Sections which has an active Awards Committee, this year contemplating honoring someone who has made outstanding contributions in the field of community mental health.

The Public Health Education Section is the only Section reporting a formal plan for "leadership development"

within the Section. The results will certainly be watched with interest over the next few years.

The Statistics Section, earlier this year, co-sponsored a session with the National Center for Health Statistics on the recruitment and training of statisticians. The Section is also bringing to completion the monumental vital and health statistics monograph series being published by Harvard University Press. Mr. Mortimer Spiegelman, formerly of the Metropolitan Life Insurance Company, is now working full time in APHA headquarters on this project.

### Headquarters Staff

The biggest news of 1967 as far as headquarters staff is concerned is the move from 1790 to 1740 Broadway. For the first time in many years clean, well-lighted, air-conditioned offices are available on one floor for nearly all of our operation. The Professional Examination Service and some of our stock room activities still have to maintain some space elsewhere. And the space here, so adequate a year and a half ago when we started planning the move, is already becoming crowded. Nevertheless, working conditions are much improved.

The Annual Meeting schedule has now been completed through our centennial year, 1972, as follows: 1968-Detroit; 1969-Philadelphia; 1970-Houston; 1971-Minneapolis; and 1972-New York City.

Dr. Donald Harting, who came on our staff early this year under a Ford Foundation grant, is active in the family planning and population field. Working with schools of public health, with official health agencies, and with other academic and operating agencies, it is our hope that APHA can stimulate more rapid development and comprehensive coverage of these services throughout the nation.

Our alcoholism project, supported by the National Institute of Mental Health,

is coming to a close with the completion of a manual for health agencies in the field of alcoholism control. We have a supplement grant which will enable us to continue to some extent our work with schools of public health in developing better curricula in this area.

A number of new staff members are coming on or have already appeared. These include a new Associate Director (Communications) in the person of Mr. Robert C. Milligan, health educator, who will take over Mrs. Walsh's former responsibilities in the field of publications and conference programing. We also hope to have by the time of this Annual Meeting a nurse staff member experienced in intergroup relations whose primary responsibilities will be in the field of civil rights and the integration of health services. Another long-felt need is being filled through partial support from the Public Health Service of a four-way project to improve the teaching of medical care administration. This Association, along with the Association of University Programs in Hospital Administration, the Association of Teachers of Preventive Medicine and the Association of Schools of Public Health, is acquiring staff for that purpose.

As usual, our publications schedule is a busy one. New material due for release this year includes the following:

- Control of Infectious Diseases in General Hospitals
- Guide for Health Administrators in Housing Hygiene
- A Self-Study Guide for Community Health Action-Planning, Volumes I and II
- Standard Methods for the Examination of Dairy Products (12th ed.)
- Safe Use of Pesticides
- Services for Children with Cerebral Palsy
- Services for Children with Communicative Disorders
- Bronfman Lecture, 1966
- Services for Children with Vision and Eye Problems
- Health Officials' Guide to Occupational Health.

The Professional Examination Service continues to grow and to expand its service. The total staff reported last year as 41 has now grown to 50. Approximately 40 new examinations are developed every month; 36 jurisdictions are being served with comprehensive annual plans for all their testing needs; national licensing examinations are being provided for seven professional groups.

### Financial Situation

Last year's fiscal picture was unusually good, with an excess of income over expenditures of approximately \$108,000. This was due largely to decreased expenditures because of unfilled positions, combined with gratifyingly higher income from both membership expansion and publications. The 1967 budget approved by the Executive Board amounts to \$1,622,000, an increase of about \$200,000 over actual expenditures for 1966. With the addition of special projects amounting to about \$781,000, our total budget for 1967 will be about \$2.4 million. As of this writing, actual operations are keeping pretty close to budgeted figures.

### Field Offices

Our Western Regional Office in San Francisco continues to serve the Confederation of Western Affiliates of APHA (formerly the Western Branch, APHA). Most outstanding of the services provided through that office is the extensive network of continuing education institutes provided in cooperation with the four graduate schools of public health in that region—University of California, Berkeley; University of California, Los Angeles; University of Hawaii and, most recently, Loma Linda University. These institutes cover most of the subject areas selected by the continuing education committees in the

states making up the Western Region, and the curricula are developed by a faculty committee from the graduate schools of public health. They are mostly financed through short-term training grants from the Public Health Service. During 1966 there were 28 presentations of courses for a total participation of 1,340. For 1967, 38 course presentations have been scheduled with an estimated 2,000 participants.

The Washington Office continues to have a busy life. As reported through the Washington News Letter, Mr. Swearingen and his small staff cover an amazing variety of subject areas, both in relation to congressional committees and the various federal agencies having health responsibilities.

Last year I reported to you that the Association of State and Territorial Health Officers had contracted with APHA's Washington Office to serve as a "listening post" for them; this year the American Physical Therapy Association has made a similar arrangement with us. The Washington News Letter, which you all get as members of the Governing Council, has become so avidly sought after that we made it available this year for a subscription price of \$40 annually to appropriate individuals and agencies, outside of the Association. It is particularly valued by the legislative committees of our affiliated organizations and agency members. Mr. Swearingen and his small staff do a remarkable job of keeping up with a multiplicity of rapid-fire developments on the legislative and executive fronts. Availability of this prompt and accurate information provides the basis for timely Association action.

The newest addition to our field offices is the Southern Regional Office located in Birmingham, Ala. For several years APHA has provided substantial subsidies to the Southern Branch for the establishment and maintenance of an office serving that area. During the past

two years, professionally qualified staff have been available and this year for the first time the Regional Office is being operated as an Association office contracting with Southern Branch for certain services. Principal among the activities is the Demonstration Continuing Education Program being financed by the Public Health Service in three states of that region. A separate project staff is developing a committee structure among the affiliates in these states, and curriculum materials and television tapes are being assembled to provide continuing education on selected topics. It is expected that all of this can later be extended to the remainder of the area.

## **Affiliates**

We have affiliates in 47 states in addition to the District of Columbia and Puerto Rico. Those having no state organization for public health are mostly in the Northeast, Vermont, New Hampshire, Maine, Rhode Island, and Delaware. State public health associations represent a significant broadening of our base as there are over 25,000 members of these groups not members of the national Association. Yet they have an opportunity to be heard through the state representatives on the Governing Council. As mentioned earlier in the report, there is continuing effort to strengthen the ties between APHA and the local affiliates.

A distinct upswing this year in applications for Agency Members has brought the total to 131, representing a core income to the Association of \$53,524.55 annually. More important, steadily expanding opportunities for communication between the Association and these agencies should strengthen both.

Again, there has been little change in number or support of the Sustaining Members; there are now 42 in this

category with total annual dues amounting to \$16,850. A few groups eligible for Agency Membership were transferred during the year to that category.

### Honors

One of the ways in which the Association can bring to the attention of the profession, and also of the public, outstanding achievements in the field of public health is through our few but highly cherished awards. The Presidential Citation this year is being made to Mr. Robert Nash, formerly director of the Office of Equal Health Opportunity in the Public Health Service. The recognition is well merited for an unusually courageous and effective effort by Mr. Nash and his dedicated staff in a most difficult field.

The fourth Martha May Eliot Award for distinguished service in the field of maternal and child health went this year to Miss Elizabeth Rice of Harvard University. Miss Rice's career in the field of social service epitomized so many of the goals Dr. Eliot has long fought for, making her a particularly fitting choice for the 1967 Award.

The Sedgwick Medal this year is also particularly appropriate in that it recognizes not only a great man, Dr. George Baehr, but also the field of med-

ical care in which he has long been pre-eminent. He not only has been concerned personally with the delivery of health services, and the development of new systems for making them available, but has also taken an active part in providing guidance to the public health programs of both his city and his state.

I shall mention the Bronfman prizes only to tell you that the names of the 1967 winners will not be announced until you get your programs at Miami Beach.

In closing this report, I should like once more on behalf of all of us on the Executive Board to express sincere appreciation to the thousands of individuals who have served as committee members, task force workers, and other active participants in developing the Association's program during the past year. To any impartial observer it is obvious that the sum total of these activities has produced results which must be satisfying to those who have put out so much effort. They may rest assured that theirs is a major contribution to the goals for which this Association was founded—promotion and protection of public and personal health.

MYRON E. WEGMAN, M.D.

Dean, University of Michigan School of Public Health, Ann Arbor, Mich., Chairman

Report of the chairman of the Executive Board to the Governing Council, American Public Health Association, at the Ninety-Fifth Annual Meeting in Miami Beach, Fla., October 22, 1967.